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(to be used for all correspondence after initial filing)

Total Number of Pages In This Submission 25

Application Number	09/825,107 (conf. no. 3240)
Filing Date	April 3, 2001
First Named Inventor	Crawford, Peter J.
Group / Art Unit	2675
Examiner Name	Jorgensen, Leland R.
Attorney Docket No.	0975-003

Fee Transmittal Form Assignment Papers (for an Application Drawing(s) Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group Appeal Communication to Group Appeal Communication to Group Appeal Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Board of Appeals and Interferences Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group Appeal Communication to Group Appeal Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group Appeal Co	ENCLOSURES (check all that apply)								
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	Parts under 37 CRF								
Firm or Individual name Revin E. Flynn 37,325									
Signature Date November 3 2003	Signature	L. The	Date November 3 2003						
CERTIFICATE OF MAILING									
I hereby certify that this correspondence is being deposited with the United States Postal Service as express mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P O Box 1450, Alexandria VA 22313-1450 on this date: 11/ , 2003									
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FEE TRANSMITTAL for FY 2003 Effective 01/01/2003. Petent fees are subject to annual revision. Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete If Known 09/825,107 (conf. no. 3240) Application Number April 3, 2001 Filing Date First Named Inventor Crawford, Peter J. 2675 Examiner Name Group / Art Unit Jorgensen, Leland R. Attorney Docket No. 0975-003

METHOD OF PAYMENT (check all that apply)						FEE CALCULATION (continued)						
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☐ Check ☑ Credit card ☐ Money ☐ Other ☐ None Order ☐ Deposit Account:						Large Entity Small Entity						
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1002 340	200	2 170) (Design filing fee	·		1402	330	2402	165	Filing a brief in support of an appeal	
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SUBMITTED BY		c	Complete (if applicable)		
Name (Print/Type)	Kevin E. Flynn	Registration No. Attorney/Agent)	37,325	Telephone	919-544-5444
Signature	1/20	Z,		Date	November 3, 2003

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TO:

Examiner Leland R. Jorgensen (Art Unit 2600)

(0975-003)

FAX #:

(703) 872 9315

FROM:

Kevin E. Flynn, Reg. No. 37,325

DATE:

November 3, 2003

RE:

U.S. Application Serial No. 09/825,107 filed April 3, 2001

Attached is the Amendment and Response to the Office Action dated June 5, 2003.

A confirmation copy of the attached Amendment and Response will be sent to the United States Patent and Trademark Office by Express Mail, together with the Credit Card Payment Form for the extension of time and additional claims fees. A copy of the Credit Card Payment Form is enclosed with this facsimile transmission with the credit card number blacked out.

Please contact me at (919) 544 5444 or email me at kflynn@d2vlaw.com if you have any questions.

Thank you.





PTO/SB/06 (08-03) Approved for use through 7/31/2006, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 09/825,107 (0975-003) CLAIMS AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS 4 1 (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-FIN AFTER AMENDMENT **PREVIOUSLY EXTRA** TIONAL TIONAL PAID FOR FEE FEE ENDM Total (37 CFR 1.18(c)) Minus 3 X S OR independent (37 CFR 1.16(b)) Minus 5 X \$ = OR = FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ά REMAINING NUMBER PRESENT RATE ADDI-RATE ADDI-AFTER PREVIOUSLY PAID FOR **EXTRA** TIONAL TIONAL AMENDMENT FEE FEE Total (37 CFR 1.16(c)) Minus ENDM 27 25 2 x = 9.0018.00 OR independent (37 CFR 1.16(b)) Minus 0 x s_43_€(OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d)) OR + s TOTAL TOTAL ADD'L FEE OR 00 ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O REMAINING PRESENT NUMBER RATE ADDI-RATE ADD)-AFTER AMENDMENT PREVIOUSLY **EXTRA** TIONAL TIONAL PAID FOR ũ FEE FEE Total Minus ENDM (37 CFR 1.16(a)) X S OR Minus X S QR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) = OR TOTAL TOTAL ADO'L FEE OR ADD'L FEE

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enker "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentialty is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you mouling to complete this form and/or suppositions for reducing this hunder, should be sent to the Chief Information Officer ILS. Parent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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